



## Application Data Sheet

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Group Art Unit:: 2876  
Suggested Classification:: 235/379  
Title:: CASH DISPENSING AUTOMATED BANKING  
MACHINE WITH ADJUSTABLE FASCIA BEZEL  
Attorney Docket Number:: D-1221 R9  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Suggested Drawing Figure:: 30  
Total Drawing Sheets:: 97  
Small Entity:: No  
Petition included?: No  
Secrecy Order in Parent Appl.?: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: MX  
Status:: Full Capacity  
Given Name:: Pedro  
Middle Name::  
Family Name:: Tula  
Name Suffix::  
City of Residence:: North Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 1118 Lindylane Ave. SW  
City of mailing address:: North Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44720

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Dolar
Middle Name::	Harshadrai
Family Name::	Vaishnav
Name Suffix::	
City of Residence::	Brewster
State or Province Of Residence::	OH
Country of Residence::	US
Street of mailing address::	688 Muskingum Avenue NW
City of mailing address::	Brewster
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	44613

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Jeff  
Middle Name::  
Family Name:: Young  
Name Suffix::  
City of Residence:: North Canton  
State or Province Of Residence:: OH  
Country of Residence:: US  
Street of mailing address:: 1171 Mount Pleasant NW  
City of mailing address:: North Canton  
State or Province of mailing address:: OH  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 44720

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Dennis
Middle Name::	
Family Name::	Felt
Name Suffix::	
City of Residence::	Cambridge
State or Province Of Residence::	OH
Country of Residence::	US
Street of mailing address::	436 N. 12th Street
City of mailing address::	Cambridge
State or Province of mailing address::	OH
Country of mailing address::	US
Postal or Zip Code of mailing address::	43725

**Correspondence Information**

Correspondence Customer Number:: 28995

**Representative Information**

Representative Customer Number:	28995
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Date Filing::
This Application	An application claiming the benefit under 35 USC 119(e)	60/453,667	03/10/2003

**Assignee Information**

Assignee Name:: Diebold Self-Service Systems  
Division of Diebold, Incorporated  
City of mailing address:: North Canton  
State or Province of mailing address:: OH